



**STATE OF SOUTH CAROLINA
DEPARTMENT OF CONSUMER AFFAIRS**

**MOTOR CLUB REPRESENTATIVE APPOINTMENT
SUMMARY**

Mailing Address

P.O. Box 5757
Columbia, SC 29250-5757

www.consumer.sc.gov

803-734-4236/800-922-1594

Street Address

2221 Devine St. Suite 200
Columbia, SC 29205

Date: _____

Company Name

Street Address

Mailing Address

City/State/Zip

SSN	Name of Representative
1.	
2.	
3.	
4.	
5.	
6.	
7.	
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18.	
19.	
20.	
Total number of representatives _____ (@\$20.00 per representative) = total fee due and enclosed. \$ _____	
Failure to remit total fees due will result in return of applications	

Please attach all appointments to this Summary

For Department Use Only